

TABLE M. — CHARGE ADJUSTMENT FACTORS FOR PROFESSIONAL SERVICES CHARGE MODIFIERS  
v3.25 (January - December 2019)

CPT/HCPCS Code Modifier	Description	Charge Factor
22	Unusual Procedure	1.25
24	Unrelated E&M Service During Post-op Period	1.00
25	Distinct E&M Service	1.00
50	Bilateral Procedure	1.50
51	Multiple Procedures	1.00
52	Reduced Services	1.00
53	Discontinued Procedure	1.00
54	Surgical Care Only	1.00
55	Post-op Management Only	1.00
56	Pre-op Management Only	1.00
58	Related Procedure During Post-op Period	1.00
59	Distinct Procedural Service	1.00
62	Two Surgeons	1.00
66	Surgical Team	1.00
76	Repeat Procedure or Service by Same Physician or Other Qualified Health Care Professional	1.00
77	Repeat Procedure by Another Physician or Other Qualified Health Care Professional	1.00
78	Return to OR for Related Procedure During Post-op Period	1.00
79	Unrelated Procedure or Service by the Same Physician During the Postoperative Period	1.00
80	Assistant Surgeon	1.00
81	Minimum Assistant Surgeon	1.00
82	Assistant Surgeon	1.00
91	Repeat Clinical Diagnostic Laboratory Test	1.00
AH	Clinical Psychologist	1.00
AJ	Clinical Social Worker	1.00
AS	Assistant at Surgery	1.00
HM	Less Than Bachelor Degree Level	1.00
HN	Bachelors Degree Level	1.00
HO	Masters Degree Level	1.00
HP	Doctoral Level	1.00
L1	Separately Payable Lab Test	1.00
QK	Multiple Concurrent Anesthesia Procedures	1.00
QX	CRNA Service with MD Medical Direction	1.00
QY	Medically Directed CRNA	1.00
QZ	CRNA Service without MD Medical Direction	1.00
SA	Nurse Practitioner with Physician	1.00
SZ	Habilitative Services	1.00
TD	Registered Nurse	1.00
TE	Licensed Practical or Licensed Vocational Nurses	1.00
XE	Separate Encounter	1.00
XS	Separate Structure	1.00
XP	Separate Practitioner	1.00
XU	Unusual Non-Overlapping Service	1.00